

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐Check if different
than previously
reported. (ACC)

Madison

WI

53703

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00074450

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2010

through

08

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Cathy Stepp

Signature of Treasurer

Electronically Filed by Cathy Stepp

Date

02

09

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	<div>2010Y Y Y</div>	<div>353297.24</div>
(b) Cash on Hand at Beginning of Reporting Period	<div>381447.94</div>	
(c) Total Receipts (from Line 19)	<div>212344.76</div>	<div>1183363.40</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<div>593792.70</div>	<div>1536660.64</div>
7. Total Disbursements (from Line 31)	<div>191325.92</div>	<div>1134193.86</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>402466.78</div>	<div>402466.78</div>
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	38251.00	275642.00
(ii) Unitemized	101542.51	584418.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)	139793.51	860060.83
(b) Political Party Committees	0.00	20500.00
(c) Other Political Committees (such as PACs)	13450.00	93956.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	153243.51	974516.83
12. Transfers From Affiliated/Other Party Committees	58000.00	202461.12
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1101.25	3385.45
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	3000.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	3000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	212344.76	1183363.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	212344.76	1180363.40

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1920.40	42474.05
(ii) Non-Federal Share.....	7224.37	121104.87
(b) Other Federal Operating Expenditures.....	51410.28	376986.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	60555.05	540565.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	100.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1700.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	100.00	1800.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	130670.87	591828.82
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	130670.87	591828.82
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	191325.92	1134193.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	184101.55	1013088.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	153243.51	974516.83
34. Total Contribution Refunds (from Line 28(d))	100.00	1800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	153143.51	972716.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	53330.68	419460.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	1101.25	3385.45
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52229.43	416074.72

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Dr. Vicki Amundson

Mailing Address 842 N. 8th St

City

Black River Falls

State

WI

Zip Code

54615-9107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wausau Ins. Co,s

Occupation

Cash Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.107105

Amount of Each Receipt this Period

150.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Doris Beach

Mailing Address 2722 N 10th St Apt 202

City

Sheboygan

State

WI

Zip Code

53083-4028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.105989

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Steven Becker

Mailing Address 1455 Karla Street

City

Platteville

State

WI

Zip Code

53818-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.105977

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Thomas Bentley

Mailing Address 4080 N Port Washington Rd

City

Milwaukee

State

WI

Zip Code

53212-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bentley World Packaging

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.105927

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Marguerite Bessent

Mailing Address W338n5257 Township Rd O

City

Nashotah

State

WI

Zip Code

53058

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106586

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Frederick Bowes

Mailing Address 705 Woodland Rd

City

Kohler

State

WI

Zip Code

53044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercury Racing

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.106342

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ellen Buck

Mailing Address 3601 Sunset Dr

City

Madison

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105445

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert Campbell

Mailing Address 2340 Sisson Dr

City

La Crosse

State

WI

Zip Code

54601-6827

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAB Inc.Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.105912

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

David Carstens

Mailing Address 1221 Tenny Ave

City

Waukesha

State

WI

Zip Code

53186

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.104467

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Harry Dahl

Mailing Address PO Box 788

City

La Crosse

State

WI

Zip Code

54602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dahl Ford La Crosse Inc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.104053

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Albert W. Davis

Mailing Address 9248 Nebraska Ave

City

Cashton

State

WI

Zip Code

54619-6057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105569

Amount of Each Receipt this Period

255.00

C.

Full Name (Last, First, Middle Initial)

James Davis

Mailing Address 615 S Lake Shore Dr

City

Lake Geneva

State

WI

Zip Code

53147-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106630

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

855.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ralph Eckert

Mailing Address 4766 Highland Park Drive

City

Slinger

State

WI

Zip Code

53086-9441

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	0

Transaction ID: SA11AI.106720

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Joseph Ellis

Mailing Address 3205 N. Marietta Avenue

City

Milwaukee

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	0

Transaction ID: SA11AI.105584

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Robert Fisch

Mailing Address 420 57th St. Unit 108

City

Kenosha

State

WI

Zip Code

53140-4250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Optometrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	0

Transaction ID: SA11AI.106612

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Jean Fishbune

Mailing Address 606 Lake St

City

Tomah

State

WI

Zip Code

54660-1435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	0

Transaction ID: SA11AI.104832

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

William Flader

Mailing Address 17 Fuller Drive

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	0

Transaction ID: SA11AI.105532

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. James Folz

Mailing Address 7229 University Ave

City

Middleton

State

WI

Zip Code

53562-2759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Middleton CP School Distr-
ict

Occupation

Custodian

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.106031

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Mr. George Gaspar

Mailing Address 11444 N. Shorecliff Ln

City

Mequon

State

WI

Zip Code

53092-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investment

Occupation

Robert Baird and Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.105054

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Philip Gelatt

Mailing Address 1326 Cass Street

City

La Crosse

State

WI

Zip Code

54601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northern Engraving Corp.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.107027

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Ronetta Giese

Mailing Address 345 N. Clark St

City

West Salem

State

WI

Zip Code

54669-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Christian Chapel Day Care

Occupation

Pre-k Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.104852

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Robert Goelz

Mailing Address 1765 Carriage Court

City

Green Bay

State

WI

Zip Code

54304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106587

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Gordon Gunnlaugsson

Mailing Address 31824 Muscovy Dr

City

Hartland

State

WI

Zip Code

53029

FEC ID number of contributing
federal political committee.

C

Name of Employer
M & I Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.106961

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Gary Hastrom

Mailing Address 10430 Eagle Lake Rd.

City

Iron River

State

WI

Zip Code

54847-4555

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.105053

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Charles Haubrich

Mailing Address 33343 Academy Road

City

Burlington

State

WI

Zip Code

53105-9614

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	0

Transaction ID: SA11AI.103987

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Sandra Hay

Mailing Address 9880 S. 35th St

City

Franklin

State

WI

Zip Code

53132-8863

FEC ID number of contributing
federal political committee.

C

Name of Employer
HBH LLCOccupation
Office Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	0

Transaction ID: SA11AI.103745

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

David Ihle

Mailing Address 512 Francis Ave

City

Hudson

State

WI

Zip Code

54016-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer
WBSOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	0

Transaction ID: SA11AI.104714

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Paul Jones

Mailing Address N4704 Pinecrest Dr

City

Nashotah

State

WI

Zip Code

53058-9709

FEC ID number of contributing
federal political committee.

C

Name of Employer
A.O. Smith Corp

Occupation

Business Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.106347

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Charles Jordan

Mailing Address 7134 B Ida Rd Road

City

Egg Harbor

State

WI

Zip Code

54209

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.106305

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Kathy Kiernan

Mailing Address 1751 Scenic Rd

City

Richfield

State

WI

Zip Code

53076-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.103844

Amount of Each Receipt this Period

166.00

SUBTOTAL of Receipts This Page (optional)

516.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Gordon Lang

Mailing Address 5124 N. Ardmore Ave.

City

Whitefish Bay

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.106089

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

George Leedle

Mailing Address N474 Armsby Road

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.104964

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Craig Leipold

Mailing Address 555 Main Street Ste 500

City

Racine

State

WI

Zip Code

53403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nashville PredatorsOccupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.104005

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5085.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

David Lenz

Mailing Address PO Box 620994

City

Middleton

State

WI

Zip Code

53562-0994

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Central Management
IncOccupation
Dev. & Mgmt.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.103876

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Helen Loewi

Mailing Address 9621 North Lake Drive

City

Milwaukee

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milwaukee ResistorOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.103839

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Samuel Lowe

Mailing Address 3900 N Main St #112

City

Racine

State

WI

Zip Code

53402-3600

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105442

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Michael Mahoney

Mailing Address 9731 N Hilltop Ln

City

Mequon

State

WI

Zip Code

53092-5319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Park Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.106977

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thane Malmstone

Mailing Address PO Box 253

City

Brookfield

State

WI

Zip Code

53008-0253

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106554

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

David Martin

Mailing Address PO Box 113

City

Muscoda

State

WI

Zip Code

53573-0113

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106719

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
 Thomas Maxwell

Mailing Address 2917 White St

City State Zip Code
 Marinette WI 54143-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
 F&M Bank

Occupation
 Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.104684

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Charles Mayer

Mailing Address 318 Fond du Lac Ave

City State Zip Code
 Eden WI 53019

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105540

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
 Ronald Miller

Mailing Address P.O. Box 5035

City State Zip Code
 De Pere WI 54115

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.106193

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Donald Mueller

Mailing Address 822 Maple Dr

City

St Croix Falls

State

WI

Zip Code

54024-9004

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.105917

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Donald Muench

Mailing Address 19070 Stonehedge Dr

City

Brookfield

State

WI

Zip Code

53045

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	0

Transaction ID: SA11AI.104644

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Patrick Murphy

Mailing Address N267 W2899 Woodland Drive

City

Pewaukee

State

WI

Zip Code

53072

FEC ID number of contributing
federal political committee.

C

Name of Employer
Care-Age of BrookfieldOccupation
Nursing Homes

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: SA11AI.105995

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Mrs. Amy Oehlke

Mailing Address PO Box 6

City

Exeland

State

WI

Zip Code

54835-0006

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Post Service

Occupation
Postmaster

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.105144

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Oneida Tribe of Indians of WI

Mailing Address PO Box 365

City

Oneida

State

WI

Zip Code

54155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.107326

Amount of Each Receipt this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Oneida Tribe of Indians of WI

Mailing Address PO Box 365

City

Oneida

State

WI

Zip Code

54155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.107327

Amount of Each Receipt this Period

3000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Louise Pacholik

Mailing Address W5665 Young Rd

City

Palmyra

State

WI

Zip Code

53156-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.106840

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Stanley Payne

Mailing Address 3917 Plymouth Cir

City

Madison

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of WI

Occupation

Professor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.106419

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Pitzner

Mailing Address 3123 Harlan Cir

City

Fitchburg

State

WI

Zip Code

53711-7204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105398

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Patricia Reigle

Mailing Address PO Box 67

City

Kewaskum

State

WI

Zip Code

53040-0067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.103655

Amount of Each Receipt this Period

220.00

B.

Full Name (Last, First, Middle Initial)

Jerry Reynolds

Mailing Address N56 W12546 Silver Spring Road

City

Menomonee Falls

State

WI

Zip Code

53051-6114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Excavating Contractor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.104907

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. L. Rogge

Mailing Address W3798 Hidden River Rd

City

West Salem

State

WI

Zip Code

54669-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.104854

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Stuart Schlough

Mailing Address 1655 Connors Road

City

Marshall

State

WI

Zip Code

53559-9729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105417

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michael Schmitz

Mailing Address 500 E Juniper Ct

City

Megunon

State

WI

Zip Code

53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.103701

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Gordon Sharbuno

Mailing Address 1011 W Lincoln Ave

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105615

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 25 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Mr. John Shiely

Mailing Address 15270 Briaridge Ct

City

Elm Grove

State

WI

Zip Code

53122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Briggs and Stratton

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105316

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Lloyd Smith

Mailing Address 1312 W Grand Ave

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harborside Ltd

Occupation
Motel Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.106206

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

James Speaker

Mailing Address 3605 W Grace Ave

City

Mequon

State

WI

Zip Code

53092-2758

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.W. Speaker Corp

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105218

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ms. Theresa Starr

Mailing Address P o Box 826

City

Sturgeon Bay

State

WI

Zip Code

54235-0826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jilot Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105564

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Frederick Stratton

Mailing Address 294 Little Harbour La.

City

Naples

State

FL

Zip Code

34102-7604

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.106798

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Rudolph Sundberg

Mailing Address 1435 Feneva National Ave N

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.107054

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Faye Wacławski

Mailing Address 1879 Shady Ln

City

Grafton

State

WI

Zip Code

53024-9526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ye Olde Pharmacy

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1305.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106645

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Donald Wendorff

Mailing Address 5314 W Terry Ave

City

Milwaukee

State

WI

Zip Code

53223-3066

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105514

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

William Wessels

Mailing Address 4002 Mountain Ln

City

Wausau

State

WI

Zip Code

54401-9200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bone & Joint Clinic S.C.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105441

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Westervelt

Mailing Address 4817 Fond Du Lac Trl

City

Madison

State

WI

Zip Code

53705-4814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith-Barney

Occupation

Stockbroker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.106207

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Thomas Wilson

Mailing Address 12600 N Port Washington Rd Apt 210

City

Milwaukee

State

WI

Zip Code

53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.105038

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

John Yokley

Mailing Address W1146 S Shore Dr

City

Palmyra

State

WI

Zip Code

53156-9227

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.106583

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Fred Young

Mailing Address 3201 Michigan Blvd

City

Racine

State

WI

Zip Code

53402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Young Radiator Company

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.105423

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

C Zeiler

Mailing Address 17835 Colline Vue Ct.

City

Brookfield

State

WI

Zip Code

53045-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: SA11AI.105568

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Richard Zirbel

Mailing Address 2922 Brendon Way

City

Waukesha

State

WI

Zip Code

53188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gillen Co.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.106192

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

38251.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

ACEC WI WISPAC

Mailing Address 3 S. Poikney St.

City

Madison

State

WI

Zip Code

53703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11C.107094

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address P.O. Box 961039
Suite 220

City

Fort Worth

State

TX

Zip Code

76161

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11C.107095

Amount of Each Receipt this Period

750.00

C.

Full Name (Last, First, Middle Initial)

HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 1776 EYE STREET NW
Suite 890

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11C.107089

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)

Mailing Address P.O. Box 75000, MC 2250

City

Detroit

State

MI

Zip Code

48275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11C.107090

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (A.K.A. MEDCO HEALTH PAC)

Mailing Address 2350 KERNER BLVD., SUITE 250

City

SAN RAFAEL

State

CA

Zip Code

94901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11C.107100

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Operating Engineers Local 139 Federal PAC

Mailing Address 4702 Biltmore Lane

City

Madison

State

WI

Zip Code

53718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11C.107099

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTEE (PLS GOOD NEIGHBOR PAC)

Mailing Address 300 NORTH ELIZABETH STREET STE 4E

City State Zip Code
CHICAGO IL 60607

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: SA11C.107092

Amount of Each Receipt this Period

1200.00

B. Full Name (Last, First, Middle Initial) PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

Mailing Address 751 Broad Street
14th Floor

City State Zip Code
Newark NJ 07102

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 1 0

Transaction ID: SA11C.107087

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial) THRIVENT FINANCIAL FOR LUTHERANS-EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address Post Office Box 1892

City State Zip Code
Appleton WI 54912

FEC ID number of contributing federal political committee.

C C00121319

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: SA11C.107102

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

2950.00

TOTAL This Period (last page this line number only)

13450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 86

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202461.12

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: SA12.107107

Amount of Each Receipt this Period

58000.00

Transfer

SUBTOTAL of Receipts This Page (optional)

58000.00

TOTAL This Period (last page this line number only)

58000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 86

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 911 Panorama Tr S

City

Rochester

State

NY

Zip Code

14625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1101.25

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 1 0

Transaction ID: SA15.107115

Amount of Each Receipt this Period

1101.25

Refund for overpayment

SUBTOTAL of Receipts This Page (optional)

1101.25

TOTAL This Period (last page this line number only)

1101.25

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Aspect Consulting LLC

Mailing Address 3103 Susan Ct

City State Zip Code
Cross Plains WI 53528

Purpose of Disbursement
Consulting: compliance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107302

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2250.00

B.

Full Name (Last, First, Middle Initial)
Aspect Consulting LLC

Mailing Address 3103 Susan Ct

City State Zip Code
Cross Plains WI 53528

Purpose of Disbursement
Consulting: compliance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107197

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2250.00

C.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address PO Box 9100

City State Zip Code
Aurora IL 60507

Purpose of Disbursement
Long distance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107189

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Dan Morse Consulting LLC	Transaction ID: SB21B.107247 Date of Disbursement																				
Mailing Address 5636 Nutone St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	0												
City Fitchburg State WI Zip Code 53711-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting: Fundraising	<table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Digital Dolphin Supplies	Transaction ID: SB21B.107190 Date of Disbursement																				
Mailing Address 811 N Catalina Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Redondo Beach State CA Zip Code 90277	Amount of Each Disbursement this Period																				
Purpose of Disbursement Printer supplies	<table border="1"> <tr> <td colspan="10">361.50</td> </tr> </table>	361.50																			
361.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Great Graphics	Transaction ID: SB21B.107133 Date of Disbursement																				
Mailing Address 3223 W Beltline Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	0												
City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period																				
Purpose of Disbursement Printing	<table border="1"> <tr> <td colspan="10">895.00</td> </tr> </table>	895.00																			
895.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7256.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Great Graphics	Transaction ID: SB21B.107188 Date of Disbursement
Mailing Address 3223 W Beltline Hwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Middleton State WI Zip Code 53562	Amount of Each Disbursement this Period
Purpose of Disbursement Printing	<div> <div></div> <div>49.23</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) M&I Bank	Transaction ID: SB21B.107116 Date of Disbursement
Mailing Address 1 E Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Bank fee	<div> <div></div> <div>45.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) M&I Bank	Transaction ID: SB21B.107128 Date of Disbursement
Mailing Address 1 E Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-0000	Amount of Each Disbursement this Period
Purpose of Disbursement bank fee	<div> <div></div> <div>333.73</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

427.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) M&I Bank	Transaction ID: SB21B.107246 Date of Disbursement																				
Mailing Address 1 E Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	1	0												
City Madison State WI Zip Code 53703-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank fee	<table border="1"> <tr> <td>45.00</td> </tr> </table>	45.00																			
45.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) M&I Bank	Transaction ID: SB21B.107261 Date of Disbursement																				
Mailing Address 1 E Main St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	1	0												
City Madison State WI Zip Code 53703-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank fee	<table border="1"> <tr> <td>73.00</td> </tr> </table>	73.00																			
73.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.107118 Date of Disbursement																				
Mailing Address PO Box 1111	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	1	0												
City Madison State WI Zip Code 53701-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement cc processing fee	<table border="1"> <tr> <td>68.00</td> </tr> </table>	68.00																			
68.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

186.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.107119 Date of Disbursement																				
Mailing Address PO Box 1111	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	1	0												
City Madison State WI Zip Code 53701-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement cc processing fee Candidate Name	<table border="1"> <tr> <td colspan="10">1.07</td> </tr> </table>	1.07																			
1.07																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.107127 Date of Disbursement																				
Mailing Address PO Box 1111	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	0		2	0	1	0												
City Madison State WI Zip Code 53701-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement cc processing fee Candidate Name	<table border="1"> <tr> <td colspan="10">301.25</td> </tr> </table>	301.25																			
301.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.107245 Date of Disbursement																				
Mailing Address PO Box 1111	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	1	0												
City Madison State WI Zip Code 53701-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement cc processing fee Candidate Name	<table border="1"> <tr> <td colspan="10">15.95</td> </tr> </table>	15.95																			
15.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

318.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Ouzo Cafe	Transaction ID: SB21B.107308 Date of Disbursement
Mailing Address 776 N Milwaukee St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 7 / 2 0 1 0</div> </div>
City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period <div>38.70</div>
Purpose of Disbursement 8/5 Priebus reimbursement: meeting Candidate Name	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Ouzo Cafe	Transaction ID: SB21B.107305 Date of Disbursement
Mailing Address 776 N Milwaukee St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 3 / 2 0 1 0</div> </div>
City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period <div>41.21</div>
Purpose of Disbursement 8/5 Priebus reimbursement: meeting Candidate Name	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Ouzo Cafe	Transaction ID: SB21B.107304 Date of Disbursement
Mailing Address 776 N Milwaukee St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Milwaukee State WI Zip Code 53202	Amount of Each Disbursement this Period <div>27.92</div>
Purpose of Disbursement 8/5 Priebus reimbursement: meeting Candidate Name	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
BRM postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107183

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
BRM postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Reince Priebus

Mailing Address 2340 2nd Street

City Kenosha State WI Zip Code 54140

Purpose of Disbursement
Expense reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107123

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2418.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 86

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Purchase Power	Transaction ID: SB21B.107138 Date of Disbursement																				
Mailing Address Po Box 856042	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	0												
City Louisville State KY Zip Code 40285	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage for meter	<table border="1"> <tr> <td colspan="10">3149.43</td> </tr> </table>	3149.43																			
3149.43																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Right Angle Consulting	Transaction ID: SB21B.107124 Date of Disbursement																				
Mailing Address 314 South Main	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	1	0												
City Deerfield State WI Zip Code 53531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting: Communication	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Rock Bottom Brewery	Transaction ID: SB21B.107311 Date of Disbursement																				
Mailing Address 740 N Plankinton Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	1	0												
City Milwaukee State WI Zip Code 53203	Amount of Each Disbursement this Period																				
Purpose of Disbursement 8/5 Priebus reimbursement: meeting	<table border="1"> <tr> <td colspan="10">160.87</td> </tr> </table>	160.87																			
160.87																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4149.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Rock Bottom Brewery	Transaction ID: SB21B.107307 Date of Disbursement																				
Mailing Address 740 N Plankinton Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	1	0												
<table border="1"> <tr> <td>City Milwaukee</td> <td>State WI</td> <td>Zip Code 53203</td> </tr> <tr> <td colspan="2">Purpose of Disbursement 8/5 Priebus reimbursement: meeting</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Milwaukee	State WI	Zip Code 53203	Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>35.90</td> </tr> </table>	35.90											
City Milwaukee	State WI	Zip Code 53203																			
Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type																			
Candidate Name																					
35.90																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td colspan="2">District:</td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:		[MEMO ITEM]														
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																				
B. Full Name (Last, First, Middle Initial) Rock Bottom Brewery	Transaction ID: SB21B.107309 Date of Disbursement																				
Mailing Address 740 N Plankinton Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	7		2	0	1	0												
<table border="1"> <tr> <td>City Milwaukee</td> <td>State WI</td> <td>Zip Code 53203</td> </tr> <tr> <td colspan="2">Purpose of Disbursement 8/5 Priebus reimbursement: meeting</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Milwaukee	State WI	Zip Code 53203	Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>48.37</td> </tr> </table>	48.37											
City Milwaukee	State WI	Zip Code 53203																			
Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type																			
Candidate Name																					
48.37																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td colspan="2">District:</td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:		[MEMO ITEM]														
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																				
C. Full Name (Last, First, Middle Initial) Rock Bottom Brewery	Transaction ID: SB21B.107306 Date of Disbursement																				
Mailing Address 740 N Plankinton Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	6		2	0	1	0												
<table border="1"> <tr> <td>City Milwaukee</td> <td>State WI</td> <td>Zip Code 53203</td> </tr> <tr> <td colspan="2">Purpose of Disbursement 8/5 Priebus reimbursement: meeting</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Milwaukee	State WI	Zip Code 53203	Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>38.52</td> </tr> </table>	38.52											
City Milwaukee	State WI	Zip Code 53203																			
Purpose of Disbursement 8/5 Priebus reimbursement: meeting		<input type="text"/> Category/ Type																			
Candidate Name																					
38.52																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State:</td> <td colspan="2">District:</td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:		[MEMO ITEM]														
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
State:	District:																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
SCM Associates

Mailing Address 1283 Main St

City State Zip Code
Dublin NH 03444

Purpose of Disbursement
Finance mailing: list & design

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.107192

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1602.95

B.

Full Name (Last, First, Middle Initial)
Thunder Bay Grille

Mailing Address N14 W2430 Tower Place

City State Zip Code
Pewaukee WI 53072

Purpose of Disbursement
8/5 Priebus reimbursement: meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.107310

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27.32

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Tusk Mobile LLC

Mailing Address 2000 Massachusetts Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Messaging service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.107195

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2602.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.107139 Date of Disbursement																				
Mailing Address 105 E Wisconsin Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	0												
City Oconomowoc State WI Zip Code 53066-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Finance mailing Candidate Name	<table border="1"> <tr> <td colspan="10">8000.00</td> </tr> </table>	8000.00																			
8000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.107186 Date of Disbursement																				
Mailing Address 105 E Wisconsin Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Oconomowoc State WI Zip Code 53066-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Finance mailing Candidate Name	<table border="1"> <tr> <td colspan="10">8005.23</td> </tr> </table>	8005.23																			
8005.23																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.107196 Date of Disbursement																				
Mailing Address 105 E Wisconsin Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Oconomowoc State WI Zip Code 53066-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Finance mailing Candidate Name	<table border="1"> <tr> <td colspan="10">8084.90</td> </tr> </table>	8084.90																			
8084.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

24090.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
WI Farm Technology Days Inc.

Mailing Address 211 Canal Rd

City Waterloo State WI Zip Code 53594

Purpose of Disbursement
Event booth

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.107184

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

51350.05

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.107303 Date of Disbursement
Mailing Address PO Box 6164	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 1 0</div> </div>
City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
Purpose of Disbursement Employee simple IRA	<div>568.71</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.107182 Date of Disbursement
Mailing Address PO Box 6164	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
Purpose of Disbursement employee simple IRA	<div>553.96</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.107241 Date of Disbursement
Mailing Address PO Box 6164	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
Purpose of Disbursement employee simple IRA	<div>696.56</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1819.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Andrew Amys	Transaction ID: SB30B.107229 Date of Disbursement																				
Mailing Address 8773 E. Berg Park Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Poplar State WI Zip Code 54864-9052	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">461.75</td> </tr> </table>	461.75																			
461.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB30B.107254 Date of Disbursement																				
Mailing Address PO Box 9100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Aurora State IL Zip Code 60507	Amount of Each Disbursement this Period																				
Purpose of Disbursement Phones	<table border="1"> <tr> <td colspan="10">120.44</td> </tr> </table>	120.44																			
120.44																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB30B.107268 Date of Disbursement																				
Mailing Address PO Box 9100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	5		2	0	1	0												
City Aurora State IL Zip Code 60507	Amount of Each Disbursement this Period																				
Purpose of Disbursement Phones	<table border="1"> <tr> <td colspan="10">208.43</td> </tr> </table>	208.43																			
208.43																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

790.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.107152 Date of Disbursement																				
Mailing Address 250 Femrite Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">603.62</td> </tr> </table>	603.62																			
603.62																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.107212 Date of Disbursement																				
Mailing Address 250 Femrite Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">691.22</td> </tr> </table>	691.22																			
691.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.107153 Date of Disbursement																				
Mailing Address 3914 Rieder Road #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">429.03</td> </tr> </table>	429.03																			
429.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1723.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Matthew Brabender

Mailing Address 3914 Rieder Road #1

City Madison State WI Zip Code 53704

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107213

Date of Disbursement

/ /

Amount of Each Disbursement this Period

513.86

B.

Full Name (Last, First, Middle Initial)
Ashley M Burns

Mailing Address 420 W Gorham St #210

City Madison State WI Zip Code 53703

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107142

Date of Disbursement

/ /

Amount of Each Disbursement this Period

517.83

C.

Full Name (Last, First, Middle Initial)
Ashley M Burns

Mailing Address 420 W Gorham St #210

City Madison State WI Zip Code 53703

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

517.83

SUBTOTAL of Disbursements This Page (optional)

1549.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Charter Communications

Mailing Address PO Box 3255

City Milwaukee State WI Zip Code 53201-0000

Purpose of Disbursement
Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107255

Date of Disbursement

/ /

Amount of Each Disbursement this Period

253.18

B.

Full Name (Last, First, Middle Initial)
Charter Communications

Mailing Address PO Box 3255

City Milwaukee State WI Zip Code 53201-0000

Purpose of Disbursement
Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107264

Date of Disbursement

/ /

Amount of Each Disbursement this Period

84.08

C.

Full Name (Last, First, Middle Initial)
Molly Christianson

Mailing Address 5133 Woodfield Dr.

City Carmel State IN Zip Code 46033

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107141

Date of Disbursement

/ /

Amount of Each Disbursement this Period

881.64

SUBTOTAL of Disbursements This Page (optional)

1218.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Molly Christianson Mailing Address 5133 Woodfield Dr.	Transaction ID: SB30B.107202 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Carmel State IN Zip Code 46033 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>881.65</div>
B. Full Name (Last, First, Middle Initial) Tristan D. Cook Mailing Address 2623 Pennington Circle City Madison State WI Zip Code 53711 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107169 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1351.17</div>
C. Full Name (Last, First, Middle Initial) Tristan D. Cook Mailing Address 2623 Pennington Circle City Madison State WI Zip Code 53711 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107230 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1123.31</div>

SUBTOTAL of Disbursements This Page (optional)

3356.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Colleen Coyle

Mailing Address 3494 Sabaka Trail

City Verona State WI Zip Code 53573

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107226

Date of Disbursement

/ /

Amount of Each Disbursement this Period

445.79

B.

Full Name (Last, First, Middle Initial)
D&S Technologies LLC

Mailing Address 405 N Calhoun Rd

City Brookfield State WI Zip Code 53005

Purpose of Disbursement
Tech installation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107259

Date of Disbursement

/ /

Amount of Each Disbursement this Period

722.68

C.

Full Name (Last, First, Middle Initial)
Michael Dailey

Mailing Address 8865 S Oak Park Dr

City Oak Creek State WI Zip Code 53154

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107250

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1101.25

SUBTOTAL of Disbursements This Page (optional)

2269.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Michael Dailey

Mailing Address 8865 S Oak Park Dr

City State Zip Code
Oak Creek WI 53154

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1011.37

B.

Full Name (Last, First, Middle Initial)

Michael Dailey

Mailing Address 8865 S Oak Park Dr

City State Zip Code
Oak Creek WI 53154

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107231

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1257.53

C.

Full Name (Last, First, Middle Initial)

Andrew Davis

Mailing Address 2525 S Shore Dr

City State Zip Code
Milwaukee WI 53207-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107167

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1703.40

SUBTOTAL of Disbursements This Page (optional)

3972.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Andrew Davis Mailing Address 2525 S Shore Dr	Transaction ID: SB30B.107225 Date of Disbursement <div> <div>08</div> <div>31</div> <div>2010</div> </div>
City Milwaukee State WI Zip Code 53207-0000 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1873.37</div>
B. Full Name (Last, First, Middle Initial) Dean Care Mailing Address PO Box 88610 City Milwaukee State WI Zip Code 53288 Purpose of Disbursement health insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107120 Date of Disbursement <div> <div>08</div> <div>05</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>2765.89</div>
C. Full Name (Last, First, Middle Initial) Nicholas C DeJong Mailing Address 2001 Green Tree Rd City Junction City State WI Zip Code 54443 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107171 Date of Disbursement <div> <div>08</div> <div>15</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>976.43</div>

SUBTOTAL of Disbursements This Page (optional)

5615.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Nicholas C DeJong	Transaction ID: SB30B.107232 Date of Disbursement
Mailing Address 2001 Green Tree Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Junction City State WI Zip Code 54443	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1153.01</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.107121 Date of Disbursement
Mailing Address PO Box 828	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 5 / 2 0 1 0</div> </div>
City Stevens Point State WI Zip Code 54481	Amount of Each Disbursement this Period
Purpose of Disbursement dental insurance	<div>440.97</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Thomas Dickens	Transaction ID: SB30B.107168 Date of Disbursement
Mailing Address 420 W. Gorham St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-2034	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1083.38</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2677.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Thomas Dickens	Transaction ID: SB30B.107228 Date of Disbursement
Mailing Address 420 W. Gorham St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-2034	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1461.78</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.107154 Date of Disbursement
Mailing Address 126 North Blair Street #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1391.37</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.107214 Date of Disbursement
Mailing Address 126 North Blair Street #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1232.29</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4085.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: SB30B.107282 Date of Disbursement
Mailing Address P.O. Box 94515	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 31 / 2010</div> </div>
City Palatine State IL Zip Code 60094-4515	Amount of Each Disbursement this Period
Purpose of Disbursement Shipping Candidate Name <div>Category/Type</div>	<div>1473.54</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Green Bay Broadway Development	Transaction ID: SB30B.107251 Date of Disbursement
Mailing Address 3148 Mid Valley Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 05 / 2010</div> </div>
City De Pere State WI Zip Code 54115	Amount of Each Disbursement this Period
Purpose of Disbursement Rent Candidate Name <div>Category/Type</div>	<div>1200.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Green Bay Broadway Development	Transaction ID: SB30B.107270 Date of Disbursement
Mailing Address 3148 Mid Valley Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 30 / 2010</div> </div>
City De Pere State WI Zip Code 54115	Amount of Each Disbursement this Period
Purpose of Disbursement Rent Candidate Name <div>Category/Type</div>	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

3673.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Amy Harriman Mailing Address 544 W Main St #206	Transaction ID: SB30B.107150 Date of Disbursement <div> <div>08</div> <div>15</div> <div>2010</div> </div>
City Madison State WI Zip Code 53703 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>463.99</div>
B. Full Name (Last, First, Middle Initial) Amy Harriman Mailing Address 544 W Main St #206 City Madison State WI Zip Code 53703 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107210 Date of Disbursement <div> <div>08</div> <div>31</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>629.04</div>
C. Full Name (Last, First, Middle Initial) Hatchery Hill Investment, LLC Mailing Address 2000 Cahill Main, Suite 216 City Fitchburg State WI Zip Code 53711 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107271 Date of Disbursement <div> <div>08</div> <div>30</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>

SUBTOTAL of Disbursements This Page (optional)

2093.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Donna Heimbach

Mailing Address 3002 Dianne Drive

City
Middleton

State
WI

Zip Code
53562

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107155

Date of Disbursement

/ /

Amount of Each Disbursement this Period

512.49

B.

Full Name (Last, First, Middle Initial)

Donna Heimbach

Mailing Address 3002 Dianne Drive

City
Middleton

State
WI

Zip Code
53562

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107215

Date of Disbursement

/ /

Amount of Each Disbursement this Period

749.57

C.

Full Name (Last, First, Middle Initial)

HiLife Investments

Mailing Address PO Box 999

City
Stevens Point

State
WI

Zip Code
54481

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107252

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

3262.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Ashley Jacobs

Mailing Address 316 Winslow Adams

City Madison State WI Zip Code 53716

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107177

Date of Disbursement

/ /

Amount of Each Disbursement this Period

514.57

B.

Full Name (Last, First, Middle Initial)

Ashley Jacobs

Mailing Address 316 Winslow Adams

City Madison State WI Zip Code 53716

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107238

Date of Disbursement

/ /

Amount of Each Disbursement this Period

601.42

C.

Full Name (Last, First, Middle Initial)

Mark Jefferson

Mailing Address 1678 Cottonville Ave

City Arkdale State WI Zip Code 54613-9614

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2420.07

SUBTOTAL of Disbursements This Page (optional)

3536.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.107201 Date of Disbursement
Mailing Address 1678 Cottonville Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Arkdale State WI Zip Code 54613-9614	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div> <div></div> <div>2420.09</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Matthew Kimble	Transaction ID: SB30B.107156 Date of Disbursement
Mailing Address 402 Nichols Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Monona State WI Zip Code 53716	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div> <div></div> <div>331.71</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Matthew Kimble	Transaction ID: SB30B.107216 Date of Disbursement
Mailing Address 402 Nichols Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Monona State WI Zip Code 53716	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div> <div></div> <div>397.64</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3149.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Brian Kind Mailing Address 405 Doral Court	Transaction ID: SB30B.107143 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Waunakee State WI Zip Code 53597 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1789.60</div>
B. Full Name (Last, First, Middle Initial) Brian Kind Mailing Address 405 Doral Court City Waunakee State WI Zip Code 53597 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107204 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1558.44</div>
C. Full Name (Last, First, Middle Initial) La Crosse County Republican Party Mailing Address 208 S. 4th St City La Crosse State WI Zip Code 54601 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107253 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>750.00</div>

SUBTOTAL of Disbursements This Page (optional)

4098.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
La Crosse County Republican Party

Mailing Address 208 S. 4th St

City State Zip Code
La Crosse WI 54601

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107263

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
La Crosse County Republican Party

Mailing Address 208 S. 4th St

City State Zip Code
La Crosse WI 54601

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107272

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Nicholas Lauren

Mailing Address S8338 Oriole Dr

City State Zip Code
Eau Claire WI 54701

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Nicholas Lauren

Mailing Address S8338 Oriole Dr

City Eau Claire State WI Zip Code 54701

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107233

Date of Disbursement

/ /

Amount of Each Disbursement this Period

970.32

B.

Full Name (Last, First, Middle Initial)
Crystal Lee

Mailing Address 614 Langdon Street

City Madison State WI Zip Code 53703-1163

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107173

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1034.08

C.

Full Name (Last, First, Middle Initial)
Crystal Lee

Mailing Address 614 Langdon Street

City Madison State WI Zip Code 53703-1163

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

970.32

SUBTOTAL of Disbursements This Page (optional)

2974.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Kimberly Liedl

Mailing Address 1101 Engelhart Dr

City
Madison

State
WI

Zip Code
53713

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1642.01

B.

Full Name (Last, First, Middle Initial)

Kimberly Liedl

Mailing Address 1101 Engelhart Dr

City
Madison

State
WI

Zip Code
53713

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107222

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1642.01

C.

Full Name (Last, First, Middle Initial)

Larry Loomis

Mailing Address 762 Briar Ln

City
Beloit

State
WI

Zip Code
53511-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107157

Date of Disbursement

/ /

Amount of Each Disbursement this Period

459.01

SUBTOTAL of Disbursements This Page (optional)

3743.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.107301 Date of Disbursement
Mailing Address 762 Briar Ln	<div> <div><small>M</small>0<div><small>M</small>8</div></div> <div>/</div> <div><small>D</small>3<div><small>D</small>1</div></div> <div>/</div> <div><small>Y</small>2<div><small>Y</small>0</div></div> <div><small>Y</small>1<div><small>Y</small>0</div></div> </div>
City Beloit State WI Zip Code 53511-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>741.58</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) David R Luhman	Transaction ID: SB30B.107158 Date of Disbursement
Mailing Address 616 Bartels St	<div> <div><small>M</small>0<div><small>M</small>8</div></div> <div>/</div> <div><small>D</small>1<div><small>D</small>5</div></div> <div>/</div> <div><small>Y</small>2<div><small>Y</small>0</div></div> <div><small>Y</small>1<div><small>Y</small>0</div></div> </div>
City Monona State WI Zip Code 53718	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>514.70</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) David R Luhman	Transaction ID: SB30B.107217 Date of Disbursement
Mailing Address 616 Bartels St	<div> <div><small>M</small>0<div><small>M</small>8</div></div> <div>/</div> <div><small>D</small>3<div><small>D</small>1</div></div> <div>/</div> <div><small>Y</small>2<div><small>Y</small>0</div></div> <div><small>Y</small>1<div><small>Y</small>0</div></div> </div>
City Monona State WI Zip Code 53718	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>633.01</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1889.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Lucas Moench

Mailing Address 1022 W Johnson #602

City
Madison

State
WI

Zip Code
53715-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107178

Date of Disbursement

/ /

Amount of Each Disbursement this Period

546.02

B.

Full Name (Last, First, Middle Initial)

Lucas Moench

Mailing Address 1022 W Johnson #602

City
Madison

State
WI

Zip Code
53715-0000

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107239

Date of Disbursement

/ /

Amount of Each Disbursement this Period

575.97

C.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 911 Panorama Tr S

City
Rochester

State
NY

Zip Code
14625

Purpose of Disbursement
payroll tax

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107179

Date of Disbursement

/ /

Amount of Each Disbursement this Period

977.59

SUBTOTAL of Disbursements This Page (optional)

2099.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.107180 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll processing fee Candidate Name	<div>148.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.107181 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll tax Candidate Name	<div>13491.73</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.107198 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll tax Candidate Name	<div>13245.25</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

26885.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.107199 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement payroll processing fee Candidate Name	<div> <div>131.86</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.107200 Date of Disbursement
Mailing Address 911 Panorama Tr S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Rochester State NY Zip Code 14625	Amount of Each Disbursement this Period
Purpose of Disbursement unemployment tax Candidate Name	<div> <div>1019.47</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Scott Poole	Transaction ID: SB30B.107159 Date of Disbursement
Mailing Address 1528 Sellery Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Middleton State WI Zip Code 53562-0000	Amount of Each Disbursement this Period
Purpose of Disbursement payroll Candidate Name	<div> <div>221.46</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1372.79

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27		28a		28b		28c		29		x 30b

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

730.68

366.65

669.98

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Matthew Pugh	Transaction ID: SB30B.107205 Date of Disbursement
Mailing Address 537 Shady Wood Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53714	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>81.26</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sue Quinn	Transaction ID: SB30B.107312 Date of Disbursement
Mailing Address 3260 E Carrollton Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 1 0</div> </div>
City Oak Creek State WI Zip Code 53154	Amount of Each Disbursement this Period
Purpose of Disbursement Rent	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Daniel Resch	Transaction ID: SB30B.107160 Date of Disbursement
Mailing Address 2 Northridge Terrace Apt C	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>579.78</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2661.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Daniel Resch	Transaction ID: SB30B.107219 Date of Disbursement
Mailing Address 2 Northridge Terrace Apt C	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>778.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Daniel Romportl	Transaction ID: SB30B.107165 Date of Disbursement
Mailing Address 110 E Johnson St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1255.19</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Daniel Romportl	Transaction ID: SB30B.107223 Date of Disbursement
Mailing Address 110 E Johnson St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1255.19</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3289.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Lauren Schroeder	Transaction ID: SB30B.107147 Date of Disbursement
Mailing Address 251 Langdon St #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53715-1026	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>333.09</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lauren Schroeder	Transaction ID: SB30B.107207 Date of Disbursement
Mailing Address 251 Langdon St #1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53715-1026	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>413.45</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Nicholas Smalley	Transaction ID: SB30B.107174 Date of Disbursement
Mailing Address 118 S Washington St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Green Bay State WI Zip Code 54301	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>1123.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1870.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Nicholas Smalley

Mailing Address 118 S Washington St

City State Zip Code
Green Bay WI 54301

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Shawn W Smith

Mailing Address 6108 Princeton Ln

City State Zip Code
Racine WI 53402

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107175

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Shawn W Smith

Mailing Address 6108 Princeton Ln

City State Zip Code
Racine WI 53402

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.107237

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

3594.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Sprint Mailing Address PO Box 4181	Transaction ID: SB30B.107300 Date of Disbursement <div> <div>08</div> <div>10</div> <div>2010</div> </div>
City State Zip Code Carol Stream IL 60197 Purpose of Disbursement Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>666.04</div>
B. Full Name (Last, First, Middle Initial) State of Wisconsin Legislative Human Resources Mailing Address PO Box 7882 City State Zip Code Madison WI 53707 Purpose of Disbursement Employee benefits reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107129 Date of Disbursement <div> <div>08</div> <div>12</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>2209.41</div>
C. Full Name (Last, First, Middle Initial) Craig J Summerfield Mailing Address 1117 Pauline Ave City State Zip Code Madison WI 53705 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107166 Date of Disbursement <div> <div>08</div> <div>15</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1221.34</div>

SUBTOTAL of Disbursements This Page (optional)

4096.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Craig J Summerfield	Transaction ID: SB30B.107224 Date of Disbursement																				
Mailing Address 1117 Pauline Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">1221.33</td> </tr> </table>	1221.33																			
1221.33																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Brendan Sweeney	Transaction ID: SB30B.107148 Date of Disbursement																				
Mailing Address 1014 College Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Madison State WI Zip Code 53715	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">359.43</td> </tr> </table>	359.43																			
359.43																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Brendan Sweeney	Transaction ID: SB30B.107208 Date of Disbursement																				
Mailing Address 1014 College Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Madison State WI Zip Code 53715	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">211.25</td> </tr> </table>	211.25																			
211.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1792.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
The Tarrance Group

Mailing Address 201 North Union Street STE 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Polling: generic election activity

Candidate Name

005
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107248

Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

8719.00

B.

Full Name (Last, First, Middle Initial)
Time Warner Cable

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement
Phones/Cable

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107256

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

669.82

C.

Full Name (Last, First, Middle Initial)
Time Warner Cable

Mailing Address PO Box 3237

City Milwaukee State WI Zip Code 53201-3237

Purpose of Disbursement
Cable/Phones

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107265

Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

79.20

SUBTOTAL of Disbursements This Page (optional)

9468.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Anton Urso	Transaction ID: SB30B.107161 Date of Disbursement
Mailing Address 405 Nichols Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Monona State WI Zip Code 53716	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>532.23</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Anton Urso	Transaction ID: SB30B.107220 Date of Disbursement
Mailing Address 405 Nichols Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Monona State WI Zip Code 53716	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>579.93</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jonathan Wacławski	Transaction ID: SB30B.107149 Date of Disbursement
Mailing Address 315 N. Franklin St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-1580	Amount of Each Disbursement this Period
Purpose of Disbursement payroll	<div>2188.21</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3300.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Jonathan Wacławski Mailing Address 315 N. Franklin St.	Transaction ID: SB30B.107209 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Madison State WI Zip Code 53703-1580 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1881.21</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Andrew Welhouse Mailing Address 718 Bear Claw Way #204 City Madison State WI Zip Code 53717 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107146 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1551.30</div> <div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Andrew Welhouse Mailing Address 718 Bear Claw Way #204 City Madison State WI Zip Code 53717 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.107206 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1601.31</div> <div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

5033.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107162

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2010

Amount of Each Disbursement this Period

661.94

B.

Full Name (Last, First, Middle Initial)

Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107221

Date of Disbursement

M M / D D / Y Y Y Y
08 / 31 / 2010

Amount of Each Disbursement this Period

605.09

C.

Full Name (Last, First, Middle Initial)

WPS

Mailing Address PO Box 19003

City Green Bay State WI Zip Code 54307

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107266

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2010

Amount of Each Disbursement this Period

632.70

SUBTOTAL of Disbursements This Page (optional)

1899.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)

Katilyn Ziebell

Mailing Address 1004 College Ct

City
Madison

State
WI

Zip Code
53715

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107151

Date of Disbursement

/ /

Amount of Each Disbursement this Period

383.97

B.

Full Name (Last, First, Middle Initial)

Katilyn Ziebell

Mailing Address 1004 College Ct

City
Madison

State
WI

Zip Code
53715

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.107211

Date of Disbursement

/ /

Amount of Each Disbursement this Period

519.50

SUBTOTAL of Disbursements This Page (optional) ►

903.47

TOTAL This Period (last page this line number only) ►

130087.23

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 83 / 86

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
 West Bend Mutual Insurance

Mailing Address

1900 South 18th Ave

City	State	Zip Code
West Bend	WI	53095

Purpose of Disbursement:
 Insurance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

157334.15

Date 08 / 02 / 2010

Transaction ID: H4.107117

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

609.00

2291.00

2900.00

B. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

PO Box 9100

City	State	Zip Code
Aurora	IL	60507

Purpose of Disbursement:
 Long distance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160711.10

Date 08 / 13 / 2010

Transaction ID: H4.107131

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

709.16

2667.79

3376.95

C. Full Name (Last, First, Middle Initial)
 Badgerland Chemical & Supply

Mailing Address

PO Box 620303

City	State	Zip Code
Middleton	WI	53562

Purpose of Disbursement:
 Janitorial supplies

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160803.00

Date 08 / 13 / 2010

Transaction ID: H4.107132

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.30

72.60

91.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1337.46

5031.39

6368.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 84 / 86
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)

Green Valley Disposal

Mailing Address

P.O. Box 9001099

City

State

Zip Code

Louisville

KY

40290-0000

Purpose of Disbursement:
waste removalCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160934.35

Date

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: H4.107135

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

27.58

103.77

131.35

B. Full Name (Last, First, Middle Initial)

Impact Networking Inc.

Mailing Address

PO Box 3090

City

State

Zip Code

Milwaukee

WA

53202

Purpose of Disbursement:
Copier suppliesCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160944.90

Date

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: H4.107136

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.22

8.33

10.55

C. Full Name (Last, First, Middle Initial)

MG&E

Mailing Address

PO Box 1231

City

State

Zip Code

Madison

WI

53701

Purpose of Disbursement:
Energy billCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

161279.20

Date

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: H4.107137

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

70.20

264.10

334.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

100.00

376.20

476.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 85 / 86
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)

Wisconsin Government Accountability Board

Mailing Address

PO Box 2973

City State Zip Code

Madison WI 53701

Purpose of Disbursement:
Voter listCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

161499.20

Date 08 / 26 / 2010

Transaction ID: H4.107269

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.20

173.80

220.00

B. Full Name (Last, First, Middle Initial)

Pro One Janitorial, Inc.

Mailing Address

1101 Ashwaubenon St.

City State Zip Code

Green Bay WI 54304-0000

Purpose of Disbursement:
Cleaning serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

161999.20

Date 08 / 31 / 2010

Transaction ID: H4.107191

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

395.00

500.00

C. Full Name (Last, First, Middle Initial)

Shadow Fax

Mailing Address

4601 Helfesen Dr

City State Zip Code

Madison WI 53718

Purpose of Disbursement:
Printer inkCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

162553.08

Date 08 / 31 / 2010

Transaction ID: H4.107193

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

116.31

437.57

553.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

267.51

1006.37

1273.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 86 / 86
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
 TDS Metrocom

Mailing Address

PO Box 94510

City

State

Zip Code

Palatine

IL

60094-0000

Purpose of Disbursement:
 Office phones

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

163578.92

Date

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: H4.107194

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

215.43

810.41

1025.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

215.43

810.41

1025.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

1920.40

7224.37

9144.77